

31/24/01

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral).... Canceled  
 ÷ ..... Restricted

N	..... Non-elected
I	..... Interference
A	..... Appeal
O	..... Objected

Claim	Final Original	Date
1	✓	9-30-02
2		1-26-03
3		10-29-03
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27		
28	✓	
29	✓	
30	✓	
31	✓	
32	✓	N
33	✓	
34	✓	J
35	✓	
36	✓	N
37	✓	N
38	✓	N
39	✓	✓
40	✓	✓
41	✓	
42	✓	✓
43	✓	✓
44	✓	J
45	✓	
46	✓	✓
47	✓	
48	✓	
49	✓	
50	✓	

Claim	Final Original	Date
51	✓	10-29-03
52	✓	
53	✓	
54	✓	
55	✓	
56	✓	
57	✓	
58	✓	
59	✓	
60	✓	
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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